Towards Establishing Re-ED Validity: Preliminary Analyses and Results

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Treatment Belief Differences Between Re-EDers & Non-Re-EDers

- 100 Statements about Treatment Beliefs were rated by 65 respondents (on a 5 pt scale) as "Essential" to "Not Applicable or Not Desirable":
  - 27 Re-ED experts,
  - 14 Re-ED staffers, and
  - 24 non-Re-ED mental health hospital personnel.
- 39 of the 100 items differentiated Re-EDers from non-Re-EDers at p = .05 or less.

Patterns of Belief About Treatment

- Cluster analysis grouped similar responders to the 100 items (among the 65 Ss) into three clusters.
- Multiple discriminant analysis detected key items separating the three clusters.
  - 3 group centroids were plotted across two axes.
  - Each axis was labeled by finding a theme that connected items (group discriminators) to a shared construct.

Beliefs that Differ

Axis 1: Assets for Change Lie Within the Child's Ecology

1. Communities offer much to enrich children's lives.
2. Managers preserve the program's philosophy yet envision what can be.
3. We can all learn to be smarter.
4. Staff value clients' families and their cultures.

Beliefs that Differ

Axis 2: Relationships (+) vs. Services (-)

1. Staff emphasize the full exploration of feelings as a major part of the therapeutic process (+Relationships).
2. We can all learn to be smarter (-Services).
3. Children and adults need to be able to rely upon one another (+Relationships).
4. Therapeutic services include follow-up over time (-Services).

Axis 1: Assets for Change Lie Within the Child's Ecology
Axis 2: Relationships vs. Services

- **Traditional Re-ED Change Agents (N = 34)**
  Highest on Axis 1, Midway on Axis 2
  70% Re-ED, 30% Non-Re-ED
- **Mental Health Administrators (N = 12)**
  Lowest on Axis 1, Highest on Axis 2
  67% Non-Re-ED, 33% Re-ED staffers (1 admin "expert")
- **Traditional Therapists (N = 19)**
  Midway on Axis 1, Lowest on Axis 2
  63% Non-Re-ED, 31% Re-ED "experts" in administration, 5% Re-ED staffers (n = 1)

Summary and Implications

- There are significant differences between Re-ED and non-Re-ED thinkers.

- One need not be employed in a Re-ED espousing program to think like a Re-EDer.

- Not everyone in a Re-ED espousing program is a "Re-ED thinker."

What's Happening Now?

Preparation of standard vignettes set
for program response
(as part of fidelity measurement)

8 sites with baseline materials submitted
will complete the Self-Assessment
(4 before responding to vignettes,
4 after vignette responses)

Q#4: Quantifying Consistency with Re-ED Principles and Practices

Content analyze baseline materials
and self-assessment frameworks,
to identify operational indicators

Construct protocols for site measurement
and scoring

Field-test protocols in a few Re-ED sites,
and revise as needed

Collect outcome data for 10 new Re-ED sites,
and measure Re-Edness of each with
fidelity protocols

Q#5: Validating Re-ED Efficacy with Service Outcomes

Analyses:
Is High Re-ED Consistency related to positive
outcomes?
Are these relationships stronger as consistency
goes up, weaker as it goes down?

How and when does Re-ED work to make
positive changes in the lives of kids and
families?
The BIG QUESTION !!

Why Do All This?

The Re-ED package of principles and practices
has the unusual advantage of being
applicable to the broad spectrum of
children and families –

with the comprehensive range of
strengths and needs they represent.

What's Next?

"Are you just pissing and moaning, or can you verify what you're saying with data?"